APPENDIX 4

GRIEVANCE NOTIFICATION FORM GD/1

Section A: Employee details

This form should be completed by the employee/trade union representative when

raising a formal grievance. The employee should send the completed form to their manager.

|  |  |
| --- | --- |
| Name | Grade/Band |
| Job Title | Contact Number |
| Department | Line Manager |
| Payroll Number  |  |
| Name of Trade Union Representative | Contact Number |
| Trade Union orProfessional Organisation |  |

**Section B: Details of Grievance** (please attach additional pages if required)

|  |  |
| --- | --- |
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| N.B. If section ‘B’ is not completed it will be returned to the employee and /or representative for more detail. |

Please indicate what you would consider a satisfactory outcome: |

Section C: Monitoring information

|  |
| --- |
| We are required by Law and under the European Union Employment regulations to gather information relating to: Ethnicity, Religion and Faith, Sexual Orientation, Age, Disability and Gender for all aspects of employee relations including grievance and disciplinary proceedings. |

Section D: Signed by

(The employee or trade union representative raising the issue must sign this form).

|  |  |  |
| --- | --- | --- |
| Employee |  | Date |
| TU/ProfessionalOrganisation |  |  |